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Bib Data Sheet

CONFIRMATION NO. 8420

SERIAL NUMBER 09/747,439	FILING DATE 12/21/2000 RULE	CLASS 747 719	GROUP ART UNIT 2153 2126	ATTORNEY DOCKET NO. END920000047US
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APPLICANTS

James A. Riosa, Wiarton, CANADA;
 Andrew D. Naiberg, Austin, TX;

** CONTINUING DATA ***** *None*

** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/27/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 8	TOTAL CLAIMS 100	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i>				
Verified and Acknowledged <i>Jew</i> Examiner's Signature	Initials			

ADDRESS

John R. Pivnichny
 IBM Corporation - N50/040-4
 1701 North Street
 Endicott , NY 13760

TITLE

Hierarchical connected graph model for implementation of event management design

FILING FEE RECEIVED 2520	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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APPLICANTS James A. Riosa, Wiarton, CANADA; Andrew D. Naiberg, Austin, TX;				
** CONTINUING DATA ***** <i>None yes</i>				
** FOREIGN APPLICATIONS ***** <i>None yes</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/27/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged <i>yes</i>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>yes</i>	STATE OR COUNTRY CANADA	SHEETS DRAWING 8	TOTAL CLAIMS 100 INDEPENDENT CLAIMS 6
ADDRESS John J. Timar Womble, Carlyle, Sandridge & Rice Suite 3500 1201 West Peachtree Street Atlanta , GA 30309				
TITLE Hierarchical connected graph model for implementation of event management design				
FILING FEE RECEIVED 2520	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		